Revision: HCFA-PM-91-04 (BPD)

1991

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OMB No.: 0938-

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory:	Montana	
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NOT APPLICABLE

Premiums Imposed on Low Income Pregnant Women and Infants

- A. The following method is used to determine the monthly premium imposed on optional categorically needy pregnant women and infant covered under section 1902(a)(10)(A)(ii)(IX)(A) and (B) of the Act:
- B. A description of the billing method used is as follows (include due date for premium payment, notification of the consequences of nonpayment, and notice of procedures for requesting waiver of premium payment):

*Description provided on attachment.

TN No. 92-04 Supercedes

Approval Date 5/28/92 Ef

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	STATE	PLAN	UNDER	TITLE	XIX	OF	THE	SOCIAL	SECURITY	ACT		
State	e/Territ	cory:	Mc	ntana	<u> </u>						_	
NOT APPLICABLE												
c.	State of premium		cal fur	ids und	der c	the	r pr	ograms	are used	to pay	for	
	/ / Ve	a			,	7 N	0					

D. The criteria used for determining whether the agency will waive payment of a premium because it would cause an undue hardship on an individual are described below:

*Description provided on attachment.

TN No. 92-04
Supercedes Approval Date 5/28/92 Effective Date 1/1/92
TN No. New HCFA ID7986E